Case 13-40933-can13 Doc 1 Filed 03/19/13 Entered 03/19/13 15:42:58 Desc Main Document Page 1 of 41

| United States Bankruptcy Court Western District of Missouri | | | | | | Vol | untary Petition | |
|---|---|---|--|--|--|--|-----------------|-------------------------------------|
| Name of Debtor (if individual, enter Last, First, Middle): Quinones, Samuel NMN | | | | | ebtor (Spouse nones, Eliz | | | |
| All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): | | | | de married, | used by the J maiden, and eth Ortega | trade names) |): | years |
| Last four digits of Soc. Sec. or Individual-Taxpa; (if more than one, state all) | yer I.D. (ITIN) No./C | Complete EIN | (if more | our digits of than one, state | all) | Individual-7 | Гахрауег I.I | D. (ITIN) No./Complete EIN |
| Street Address of Debtor (No. and Street, City, at 3430 Bell Kansas City, MO | , | ZIP Code 64111 | Street 343 | | Joint Debtor | (No. and Str | reet, City, an | ZIP Code 64111 |
| County of Residence or of the Principal Place of Jackson Mailing Address of Debtor (if different from stre | Business: | | Jac | kson | nce or of the | • | | ness: |
| Location of Principal Assets of Business Debtor (if different from street address above): | | | | | ZIP Code | | | |
| Type of Debtor (Form of Organization) (Check one box) ■ Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. □ Corporation (includes LLC and LLP) □ Partnership □ Other (If debtor is not one of the above entities, check this box and state type of entity below.) Chapter 15 Debtors | Nature o (Check ☐ Health Care Bus ☐ Single Asset Rea in 11 U.S.C. § 1 ☐ Railroad ☐ Stockbroker ☐ Commodity Bro ☐ Clearing Bank ☐ Other | efined | ☐ Chapte☐ Chapte☐ Chapte☐ Chapte☐ Chapte | the I er 7 er 9 er 11 er 12 | hapter of Bankruptcy Code Under Which the Petition is Filed (Check one box) Chapter 15 Petition for Recognition of a Foreign Main Proceeding Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding Nature of Debts | | | |
| Country of debtor's center of main interests: Each country in which a foreign proceeding by, regarding, or against debtor is pending: | (Check box, Debtor is a tax-exe under Title 26 of t | Tax-Exempt Entity (Check box, if applicable) □ Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code). | | | re primarily co l in 11 U.S.C. § ed by an indivi nal, family, or | nsumer debts, 101(8) as dual primarily | for | Debts are primarily business debts. |
| Filing Fee (Check one box) Full Filing Fee attached Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B. Check one box: Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders are less than \$2,343,300 (amount subject to adjustment on 4/01/13 and every three years). Check if: A plan is being filed with this petition. Acceptances of the plan were solicited prepetition from one or more classes of credite in accordance with 11 U.S.C. § 1126(b). | | | | 51D). owed to insiders or affiliates) und every three years thereafter). | | | | |
| Statistical/Administrative Information ■ Debtor estimates that funds will be available □ Debtor estimates that, after any exempt proper there will be no funds available for distribution | erty is excluded and a | secured credi | tors. | | § 1125(0). | THIS | SPACE IS F | FOR COURT USE ONLY |
| 49 99 199 999 5 | ,000- 5,001- 5,000 10,000 | |] 5,001- 0,000 | 50,001- 100,000 | OVER 100,000 | | | |
| \$50,000 \$100,000 \$500,000 to \$1 to million in | 1,000,001 \$10,000,001 0 \$10 to \$50 nillion million | to \$100 to | 00,000,001 \$500 illion | \$500,000,001 to \$1 billion | More than \$1 billion | | | |
| \$50,000 \$100,000 \$500,000 to \$1 | 1,000,001 \$10,000,001 0 \$10 to \$50 million million | to \$100 to | 00,000,001 \$500 | \$500,000,001 to \$1 billion | | | | |

Case 13-40933-can13 Doc 1 Filed 03/19/13 Entered 03/19/13 15:42:58 Desc Main

Document Page 2 of 41 **B1** (Official Form 1)(12/11) Page 2 Name of Debtor(s): Voluntary Petition **Quinones, Samuel NMN** Ortega-Quinones, Elizabeth Joann (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Case Number: Date Filed: Location Where Filed: Western District of Missouri 04-42842 5/10/04 Date Filed: Location Case Number: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) I, the attorney for the petitioner named in the foregoing petition, declare that I (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10O) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. \mathbf{X} /s/ Jason C. Amerine March 19, 2013 Signature of Attorney for Debtor(s) (Date) Jason C. Amerine #50857 Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ■ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

Page 3 of 41 Document **B1** (Official Form 1)(12/11) Page 3

Voluntary Petition

(This page must be completed and filed in every case)

Signatures

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Samuel NMN Quinones

Signature of Debtor Samuel NMN Quinones

X /s/ Elizabeth Joann Ortega-Quinones

Signature of Joint Debtor Elizabeth Joann Ortega-Quinones

Telephone Number (If not represented by attorney)

March 19, 2013

Date

Signature of Attorney*

X /s/ Jason C. Amerine

Signature of Attorney for Debtor(s)

Jason C. Amerine #50857

Printed Name of Attorney for Debtor(s)

Castle Law Office of Kansas City

Firm Name

811 Grand Blvd. Suite 101

Kansas City, MO 64106

Address

816-842-6200 Fax: 816-421-5403

Telephone Number

March 19, 2013

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

Name of Debtor(s):

Quinones, Samuel NMN

Ortega-Quinones, Elizabeth Joann

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

| | _ | | | |
|---|----|---|---|--|
| ٩ | ٧ | v | • | |
| | ١, | 8 | | |

Date

Address

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

United States Bankruptcy Court Western District of Missouri

| In re | Samuel NMN Quinones Elizabeth Joann Ortega-Quinones | | Case No. | | |
|-------------|--|---|---------------------------------------|-----------------------|-----------------|
| | | Debtor(s) | Chapter | 13 | |
| | DISCLOSURE OF COMPEN | | | ` , | |
| C | Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 201 compensation paid to me within one year before the filing the rendered on behalf of the debtor(s) in contemplation of | g of the petition in bankruptcy, | or agreed to be paid | d to me, for services | |
| | For legal services, I have agreed to accept | | | 3,000.00 | |
| | Prior to the filing of this statement I have received | | \$ <u></u> | 375.00 | |
| | Balance Due | | \$ <u></u> | 2,625.00 | |
| 2. \$ | 281.00 of the filing fee has been paid. | | | | |
| 3. 7 | The source of the compensation paid to me was: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 4. Т | The source of compensation to be paid to me is: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 5. l | ■ I have not agreed to share the above-disclosed compe | ensation with any other person | unless they are men | nbers and associates | of my law firm. |
| I | ☐ I have agreed to share the above-disclosed compensa copy of the agreement, together with a list of the name | | | | law firm. A |
| 6.] | In return for the above-disclosed fee, I have agreed to re- | nder legal service for all aspect | s of the bankruptcy | case, including: | |
| t c | Analysis of the debtor's financial situation, and render Preparation and filing of any petition, schedules, state Representation of the debtor at the meeting of creditor [Other provisions as needed] Negotiations with secured creditors to represent a period of the provisions and application agreements and applications with secured creditors on how | ement of affairs and plan which rs and confirmation hearing, an educe to market value; exe ns as needed; preparation | may be required; and any adjourned he | arings thereof; | I filing of |
| 7. I | By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any dis any other adversary proceeding. | | | ces, relief from st | ay actions or |
| | | CERTIFICATION | | | |
| | certify that the foregoing is a complete statement of any ankruptcy proceeding. | agreement or arrangement for | payment to me for i | representation of the | debtor(s) in |
| Dated | : March 19, 2013 | /s/ Jason C. Ame | rine | | |
| | <u> </u> | Jason C. Amerine | e #50857 | | |
| | | Castle Law Office 811 Grand Blvd. | of Kansas City | | |
| | | Suite 101 | | | |
| | | Kansas City, MO | | | |
| | | 816-842-6200 Fa | x: 816-421-5403 | | |

Advance America 4625 Shawnee Dr Kansas City KS 66106

Affiliated Management Services Inc PO BOX 2119 Mission KS 66201

Americash Loans LLC 3375 Main St Kansas City MO 64111

Berlin Wheeler Inc Pob 479 Topeka KS 66601

Berlin-wheeler, inc-mo 711 W Mccarty St Jefferson City MO 65101

Capital One Auto Finance 3901 N Dallas Pkwy Plano TX 75093

Chase 10790 Rancho Bernardo Rd San Diego CA 92127

Check Smart 4996 Roe Avenue Mission KS 66205

Exe Fin Con Po Box 14765 Shawnee Mission KS 66285

Executive Financial Cons 310 Armour Road Kansas City MO 64116

Gemb/care Credit Attn: bankruptcy Po Box 103104 Roswell GA 30076 Josephine Ortega 3434 Bell Kansas City MO 64111

Kansas Counselors Of K Po Box 14765 Shawnee Mission KS 66285

KDOR 915 SW Harrison Street Topeka KS 66625

North Kansas City Hospital PO Box 419263, Dept. 222 Kansas City MO 64193

Northland Radiology P.O. Box 419380 Dept. 128 Kansas City MO 64141

Receivables Management 14675 Martin Dr Eden Prairie MN 55344

Residential Credit Slt 4282 North Fwy Fort Worth TX 76137

Sams Club / GEMB Attention: Bankruptcy Department Po Box 103104 Roswell GA 30076

St Lukes Hospital 4401 Wornall Rd. Kansas City MO 64111

Venture Financial 9500 E. 63rd St. Ste 202 Kansas City MO 64133-4951 Case 13-40933-can13 Doc 1 Filed 03/19/13 Entered 03/19/13 15:42:58 Desc Main Document Page 7 of 41

United States Bankruptcy Court Western District of Missouri

| | Samuel NMN Quinones | | | |
|-------|---------------------------------|-----------|----------|----|
| In re | Elizabeth Joann Ortega-Quinones | | Case No. | |
| | | Debtor(s) | Chapter | 13 |

VERIFICATION OF MAILING MATRIX

The above-named Debtor(s) hereby verifies that the attached list of creditors is true and correct to the best of my knowledge and includes the name and address of my ex-spouse (if any).

| Date: | March 19, 2013 | /s/ Samuel NMN Quinones | |
|-------|----------------|-------------------------------------|--|
| | | Samuel NMN Quinones | |
| | | Signature of Debtor | |
| Date: | March 19, 2013 | /s/ Elizabeth Joann Ortega-Quinones | |
| | | Elizabeth Joann Ortega-Quinones | |
| | | Signature of Debtor | |

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B6 Summary (Official Form 6 - Summary) (12/07)

United States Bankruptcy Court Western District of Missouri

| In re | Samuel NMN Quinones, | | Case No | | |
|-------|---------------------------------|---------|---------|----|--|
| | Elizabeth Joann Ortega-Quinones | | | | |
| | | Debtors | Chapter | 13 | |
| | | | _ | | |

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE | ATTACHED (YES/NO) | NO. OF SHEETS | ASSETS | LIABILITIES | OTHER |
|---|----------------------|------------------|-------------------|-------------|----------|
| A - Real Property | Yes | 1 | 414,866.00 | | |
| B - Personal Property | Yes | 4 | 11,779.00 | | |
| C - Property Claimed as Exempt | Yes | 1 | | | |
| D - Creditors Holding Secured Claims | Yes | 1 | | 201,505.00 | |
| E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E) | Yes | 2 | | 400.00 | |
| F - Creditors Holding Unsecured Nonpriority Claims | Yes | 4 | | 9,885.00 | |
| G - Executory Contracts and Unexpired Leases | Yes | 1 | | | |
| H - Codebtors | Yes | 1 | | | |
| I - Current Income of Individual Debtor(s) | Yes | 2 | | | 3,792.57 |
| J - Current Expenditures of Individual Debtor(s) | Yes | 2 | | | 1,925.00 |
| Total Number of Sheets of ALL Schedu | ıles | 19 | | | |
| | To | otal Assets | 426,645.00 | | |
| | | | Total Liabilities | 211,790.00 | |

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Form 6 - Statistical Summary (12/07)

United States Bankruptcy Court Western District of Missouri

| In re | Samuel NMN Quinones, | | Case No. | | |
|-------|---------------------------------|---------|----------|----|--|
| | Elizabeth Joann Ortega-Quinones | | | | |
| _ | | Debtors | Chapter | 13 | |

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159. Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability | Amount |
|---|--------|
| Domestic Support Obligations (from Schedule E) | 0.00 |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E) | 400.00 |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | 0.00 |
| Student Loan Obligations (from Schedule F) | 0.00 |
| Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E | 0.00 |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F) | 0.00 |
| TOTAL | 400.00 |

State the following:

| Average Income (from Schedule I, Line 16) | 3,792.57 |
|--|----------|
| Average Expenses (from Schedule J, Line 18) | 1,925.00 |
| Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20) | 4,939.00 |

State the following:

| Total from Schedule D, "UNSECURED PORTION, IF ANY" column | | 1,903.00 |
|--|--------|-----------|
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column | 400.00 | |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column | | 0.00 |
| 4. Total from Schedule F | | 9,885.00 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4) | | 11,788.00 |

Document Page 10 of 41

B6A (Official Form 6A) (12/07)

| In re | Samuel NMN Quinones, | Case No |
|-------|---------------------------------|---------|
| | Elizabeth Joann Ortega-Quinones | |

Debtors

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

| Description and Location of Property | Nature of Debtor's Interest in Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption | Amount of Secured Claim |
|--|--|---|--|----------------------------|
| 3430 Bell, Kansas City, MO 64111 | Fee simple | J | 208,471.00 | 97,945.00 |
| 3434 Bell, Kansas City, MO 64111 This is Debtor's mother's house. Debtor is on the title and cosigner on the loan. Mother makes all the payments on this loan. | Fee simple | J | 206,395.00 | 0.00 |

Sub-Total > 414,866.00 (Total of this page)

414,866.00 Total >

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B6B (Official Form 6B) (12/07)

| In re | Samuel NMN Quinones, | Case No | |
|-------|---------------------------------|---------|--|
| | Elizabeth Joann Ortega-Quinones | | |
| _ | | | |

Debtors

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

| | Type of Property | N O Description and Location of Property E | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption |
|----|---|--|---|--|
| 1. | Cash on hand | Cash | J | 20.00 |
| 2. | Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives. | Bank Midwest Checking Account | J | 9.00 |
| 3. | Security deposits with public utilities, telephone companies, landlords, and others. | X | | |
| 4. | Household goods and furnishings, including audio, video, and computer equipment. | furniture, kitchen appliances, electronics | J | 2,000.00 |
| 5. | Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles. | X | | |
| 6. | Wearing apparel. | Clothing | J | 250.00 |
| 7. | Furs and jewelry. | costume jewelry | J | 100.00 |
| 8. | Firearms and sports, photographic, and other hobby equipment. | x | | |
| 9. | Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each. | Aflac AD&D term life insurance coverage of \$50,000.00 taken out in 2006 no cash value | J | 0.00 |
| | retund value of each. | AD&D through employer Coverage of \$50,000.00 taken out in 04/2012 no cash value | Н | 0.00 |
| | | AD&D through employer Coverage of \$50,000.00 taken out in 10/2000 no cash value | J | 0.00 |
| | | | Sub-Tota | al > 2,379.00 |

³ continuation sheets attached to the Schedule of Personal Property

(Total of this page)

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 $B6B\ (Official\ Form\ 6B)\ (12/07)$ - Cont.

| In | re Samuel NMN Quinones, Elizabeth Joann Ortega-G | Quinones | | Case No. | |
|-----|---|------------------|--|---|--|
| | | SCHEDULE 1 | Debtors B - PERSONAL PROPE (Continuation Sheet) | RTY | |
| | Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
| 10. | Annuities. Itemize and name each issuer. | х | | | |
| 11. | Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | X | | | |
| 12. | Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars. | X | | | |
| 13. | Stock and interests in incorporated and unincorporated businesses. Itemize. | Х | | | |
| 14. | Interests in partnerships or joint ventures. Itemize. | X | | | |
| 15. | Government and corporate bonds and other negotiable and nonnegotiable instruments. | х | | | |
| 16. | Accounts receivable. | 2012 Tax Retu | ırns | J | 1,000.00 |
| 17. | Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars. | X | | | |
| 18. | Other liquidated debts owed to debtor including tax refunds. Give particular | X s. | | | |
| 19. | Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property. | X | | | |
| 20. | Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust. | X | | | |
| | | | | | |
| | | | | Sub-Tota (Total of this page) | al > 1,000.00 |

Sheet <u>1</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

 $B6B\ (Official\ Form\ 6B)\ (12/07)$ - Cont.

| In re | Samuel NMN Quinones, | Case No. | |
|-------|---------------------------------|----------|--|
| | Elizabeth Joann Ortega-Quinones | | |

Debtors

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

| | Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|-----|---|------------------|---|---|---|
| 21. | Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each. | X | | | |
| 22. | Patents, copyrights, and other intellectual property. Give particulars. | X | | | |
| 23. | Licenses, franchises, and other general intangibles. Give particulars. | X | | | |
| 24. | Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X | | | |
| 25. | Automobiles, trucks, trailers, and other vehicles and accessories. | | 2008 Kia Optima Vin# KNAGE123185263767 Mileage 55,000 | J | 8,400.00 |
| 26. | Boats, motors, and accessories. | X | | | |
| 27. | Aircraft and accessories. | X | | | |
| 28. | Office equipment, furnishings, and supplies. | X | | | |
| 29. | Machinery, fixtures, equipment, and supplies used in business. | X | | | |
| 30. | Inventory. | X | | | |
| 31. | Animals. | | 2 Cats | J | 0.00 |
| 32. | Crops - growing or harvested. Give particulars. | X | | | |
| 33. | Farming equipment and implements. | X | | | |
| 34. | Farm supplies, chemicals, and feed. | X | | | |
| | | | | | |
| | | | C | Sub-Tot Total of this page) | al > 8,400.00 |

Sheet <u>2</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

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 $B6B\ (Official\ Form\ 6B)\ (12/07)$ - Cont.

| In re | e Samuel NMN Quinones, Elizabeth Joann Ortega-G | Quinones | | Case No. | |
|-------|--|------------------|------------------------------------|---|---|
| | | | Debtors | | |
| | | SCHEDU | (Continuation Sheet) | ERTY | |
| | Type of Property | N O N E | Description and Location of Proper | rty Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
| | Other personal property of any kind | Х | | | |

not already listed. Itemize.

| Sub-Total > 0.00 | (Total of this page) | Total > 11,779.00 |

Sheet <u>3</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

B6C (Official Form 6C) (4/10)

| In re | Samuel NMN Quinones, | Case No. |
|-------|---------------------------------|----------|
| | Flizabeth Joann Ortega-Quinones | |

Debtors

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

| Debtor claims the exemptions to which debtor is entitled under: | ☐ Check if debtor claims a homestead exemption that exceeds |
|---|---|
| Check one box) | \$146,450. (Amount subject to adjustment on 4/1/13, and every three years thereafte |
| □ 11 U.S.C. §522(b)(2) | with respect to cases commenced on or after the date of adjustment.) |
| 11 U.S.C. 8522(b)(3) | |

| Description of Property | Specify Law Providing Each Exemption | Value of Claimed Exemption | Current Value of Property Without Deducting Exemption |
|--|---|----------------------------------|---|
| Real Property 3430 Bell, Kansas City, MO 64111 | RSMo § 513.475 RSMo § 513.430.1(3) RSMo § 513.440 | 15,000.00 171.00 1,250.00 | 208,471.00 |
| <u>Cash on Hand</u> Cash | RSMo § 513.430.1(3) | 20.00 | 20.00 |
| Checking, Savings, or Other Financial Accounts, C Bank Midwest Checking Account | Certificates of Deposit RSMo § 513.430.1(3) | 9.00 | 9.00 |
| <u>Household Goods and Furnishings</u> furniture, kitchen appliances, electronics | RSMo § 513.430.1(1) | 2,000.00 | 2,000.00 |
| Wearing Apparel Clothing | RSMo § 513.430.1(1) | 250.00 | 250.00 |
| <u>Furs and Jewelry</u> costume jewelry | RSMo § 513.430.1(2) | 100.00 | 100.00 |
| Interests in Insurance Policies Aflac AD&D term life insurance coverage of \$50,000.00 taken out in 2006 no cash value | RSMo § 513.430.1(7) | 100% | 0.00 |
| AD&D through employer Coverage of \$50,000.00 taken out in 04/2012 no cash value | RSMo § 513.430.1(7) | 100% | 0.00 |
| AD&D through employer Coverage of \$50,000.00 taken out in 10/2000 no cash value | RSMo § 513.430.1(7) | 100% | 0.00 |
| Accounts Receivable 2012 Tax Returns | RSMo § 513.430.1(3) | 1,000.00 | 1,000.00 |
| Automobiles, Trucks, Trailers, and Other Vehicles 2008 Kia Optima Vin# KNAGE123185263767 Mileage 55,000 | RSMo § 513.430.1(5) | 6,000.00 | 8,400.00 |

| Total: 25.800.00 220.250.00 | n |
|-----------------------------|---|

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B6D (Official Form 6D) (12/07)

| In re | Samuel NMN Quinones, | Case No. |
|-------|---------------------------------|----------|
| | Elizabeth Joann Ortega-Quinones | |

Debtors

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B T O R | H W J | sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | C C N T I N G E N | LIQUID | ISPUTE | AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL | UNSECURED PORTION, IF ANY |
|--|---|-------------|---|-------------------|------------------|--------|--|---------------------------------|
| Account No. 62062103210491001 | | | Opened 8/01/09 Last Active 2/02/13 | T | A T E D | | | |
| Capital One Auto Finance 3901 N Dallas Pkwy Plano, TX 75093 | | J | Auto Loan 2008 Kia Optima Vin# KNAGE123185263767 Mileage 55,000 | | | | | |
| | ┖ | | Value \$ 8,400.00 | _ | | Ц | 10,303.00 | 1,903.00 |
| Account No. 4651957851379 Chase 10790 Rancho Bernardo Rd San Diego, CA 92127 | x | w | Opened 3/01/11 Last Active 11/05/11 1st mortgage 3434 Bell, Kansas City, MO 64111 This is Debtor's mother's house. Debtor is on the title and cosigner on the loan. Mother makes all the payments on this loan. | | | | | |
| | | | Value \$ 206,395.00 | | | Ш | 93,257.00 | 0.00 |
| Account No. 2000289127 Residential Credit Slt 4282 North Fwy Fort Worth, TX 76137 | | J | Opened 1/01/03 Last Active 1/11/13 First Mortgage 3430 Bell, Kansas City, MO 64111 | | | | | |
| | | | Value \$ 208,471.00 | | | | 97,945.00 | 0.00 |
| Account No. | - | | Value \$ | | | | | |
| o continuation sheets attached | O continuation sheets attached Subtotal (Total of this page) 201,505.00 1,903.0 | | | | | | | |
| Total (Report on Summary of Schedules) 201,505.00 1,903.00 | | | | | | | | 1,903.00 |

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B6E (Official Form 6E) (4/10)

| In re | Samuel NMN Quinones, | Case No |
|--|--|---|
| _ | Elizabeth Joann Ortega-Quinones | , |
| | | btors |
| | SCHEDULE E - CREDITORS HOLDING | G UNSECURED PRIORITY CLAIMS |
| to prio accour continu T So. If a Do noto If schedu liable column "Dispu R "Total" R listed calso or R priority total al | ority should be listed in this schedule. In the boxes provided on the attached shift number, if any, of all entities holding priority claims against the debtor or the unition sheet for each type of priority and label each with the type of priority. The complete account number of any account the debtor has with the creditor is a minor child is a creditor, state the child's initials and the name and address of at disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m f any entity other than a spouse in a joint case may be jointly liable on a claim, ule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed on each claim by placing an "H," "W," "J," or "C" in the column labeled "Hus in labeled "Contingent." If the claim is unliquidated, place an "X" in the column uted." (You may need to place an "X" in more than one of these three columns deport the total of claims listed on each sheet in the box labeled "Subtotals" on "on the last sheet of the completed schedule. Report this total also on the Sum teport the total of amounts entitled to priority listed on each sheet in the box labeled in the Statistical Summary of Certain Liabilities and Related Data. | place an "X" in the column labeled "Codebtor," include the entity on the appropriate, state whether the husband, wife, both of them, or the marital community may be band, Wife, Joint, or Community." If the claim is contingent, place an "X" in the n labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled.) each sheet. Report the total of all claims listed on this Schedule E in the box labeled imary of Schedules. beled "Subtotals" on each sheet. Report the total of all amounts entitled to priority ed schedule. Individual debtors with primarily consumer debts report this total x labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to completed schedule. Individual debtors with primarily consumer debts report this |
| ☐ Cn | neck this box it debtor has no creditors holding unsecured priority claims to rep | fort on this Schedule E. |
| TYPE | ES OF PRIORITY CLAIMS (Check the appropriate box(es) below if cla | ims in that category are listed on the attached sheets) |
| □ D o | omestic support obligations | |
| | aims for domestic support that are owed to or recoverable by a spouse, former h a child, or a governmental unit to whom such a domestic support claim has be | spouse, or child of the debtor, or the parent, legal guardian, or responsible relative been assigned to the extent provided in 11 U.S.C. § 507(a)(1). |
| □ Ех | xtensions of credit in an involuntary case | |
| | aims arising in the ordinary course of the debtor's business or financial affairs e or the order for relief. 11 U.S.C. § 507(a)(3). | after the commencement of the case but before the earlier of the appointment of a |
| \square W | ages, salaries, and commissions | |
| represe | ages, salaries, and commissions, including vacation, severance, and sick leave entatives up to \$11,725* per person earned within 180 days immediately preceded first, to the extent provided in 11 U.S.C. § 507(a)(4). | pay owing to employees and commissions owing to qualifying independent sales eding the filing of the original petition, or the cessation of business, whichever |
| | 4'h4' | |

☐ Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

☐ Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$5,775* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ Deposits by individuals

Claims of individuals up to \$2,600* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

■ Taxes and certain other debts owed to governmental units

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ Commitments to maintain the capital of an insured depository institution

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

☐ Claims for death or personal injury while debtor was intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

1 continuation sheets attached

^{*} Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B6E (Official Form 6E) (4/10) - Cont.

| In re | Samuel NMN Quinones, | Case No. | |
|-------|---------------------------------|----------|--|
| | Elizabeth Joann Ortega-Quinones | | |
| _ | Debtors | | |

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts Owed to Governmental Units

TYPE OF PRIORITY UNLIQUIDATED CODEBTOR Husband, Wife, Joint, or Community AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CREDITOR'S NAME, ONTINGENT SPUTED AND MAILING ADDRESS Н DATE CLAIM WAS INCURRED **AMOUNT** INCLUDING ZIP CODE, W AND CONSIDERATION FOR CLAIM OF CLAIM AMOUNT ENTITLED TO PRIORITY C J AND ACCOUNT NUMBER (See instructions.) Account No. xxx-xx-7496/xxx-xx-3671 2010 & 2011 State Income Taxes **KDOR** 0.00 915 SW Harrison Street **Topeka, KS 66625** J 400.00 400.00 Account No. Account No. Account No. Account No. Subtotal 0.00 Sheet <u>1</u> of <u>1</u> continuation sheets attached to (Total of this page) Schedule of Creditors Holding Unsecured Priority Claims 400.00 400.00 Total 0.00 (Report on Summary of Schedules) 400.00 400.00

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B6F (Official Form 6F) (12/07)

| In re | Samuel NMN Quinones, | | Case No. |
|-------|---------------------------------|---------|----------|
| | Elizabeth Joann Ortega-Quinones | , | |
| | | Debtors | |

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

| CREDITOR'S NAME, MAILING ADDRESS | C O D E B T | Н | isband, Wife, Joint, or Community | CON | U N L | D I S | AMOUNT OF CLAIM |
|---|----------------------------|---------|---|------------|----------------|-----------------------|-----------------|
| INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | E B T O R | C N | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | TINGEN | I QU I DAT | P U T E D | AMOUNT OF CLAIM |
| Account No. xxx-xx-7496/xxx-xx-3671 | | | 2012 Payday Loan | Ï | T E D | | |
| Advance America 4625 Shawnee Dr Kansas City, KS 66106 | | J | | | | | |
| Account No. xxx-xx-7496/xxx-xx-3671 | | | 2012 Collections | <u> </u> | <u> </u> - | | 1,150.00 |
| Affiliated Management Services Inc PO BOX 2119 Mission, KS 66201 | | J | | | | | |
| 7/00/ | _ | | 2010 | igspace | | | 216.00 |
| Account No. xxx-xx-7496/xxx-xx-3671 Americash Loans LLC 3375 Main St Kansas City, MO 64111 | | J | 2012 Payday Loan | | | | 704.00 |
| Account No. 1102430982 | | | Opened 8/01/10 | \vdash | - | | 731.00 |
| Berlin Wheeler Inc Pob 479 Topeka, KS 66601 | | w | CollectionAttorney Anes.Svcs.Of Bl.Sprgs.2 07 | | | | 35.00 |
| _3 continuation sheets attached | | <u></u> | (Total of t | Sub his | | | 2,132.00 |

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B6F (Official Form 6F) (12/07) - Cont.

| In re | Samuel NMN Quinones, | Case No. |
|-------|---------------------------------|----------|
| | Elizabeth Joann Ortega-Quinones | |

Debtors SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| | 16 | 11 | shood Wife Isint or Community | С | U | D | |
|---|----------|------------------|---|----------|-------------|----------------|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | H W J C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | ONTLNGEN | N | lι | AMOUNT OF CLAIM |
| Account No. 1112500274 | | | Opened 9/01/11 | T | T E D | | |
| Berlin-wheeler,inc-mo 711 W Mccarty St Jefferson City, MO 65101 | | w | CollectionAttorney Truman Medical Center Hospital | | | | |
| Account No. xxx-xx-7496/xxx-xx-3671 | ╀ | | 2012 | + | | | 53.00 |
| Check Smart 4996 Roe Avenue Mission, KS 66205 | | J | Payday Loan | | | | |
| | | | | | | | 1,035.00 |
| Account No. 1439622 Exe Fin Con Po Box 14765 Shawnee Mission, KS 66285 | | н | Med1 02 North Kansas City Hospital | | | | 617.00 |
| Account No. 6019183089427264 Gemb/care Credit Attn: bankruptcy Po Box 103104 | | J | Opened 11/01/10 Last Active 2/15/13 ChargeAccount | | | | |
| Roswell, GA 30076 | | | | | | | 716.00 |
| Account No. 6241160003099981 Kansas Counselors Of K Po Box 14765 Shawnee Mission, KS 66285 | | н | Opened 12/01/11 CollectionAttorney Shawnee Msn Medical Ctr | | | | 567.00 |
| Sheet no1 _ of _3 _ sheets attached to Schedule of | | | | Sub | L tota | <u>1</u> ıl | |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total of | | | | 2,988.00 |

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B6F (Official Form 6F) (12/07) - Cont.

| In re | Samuel NMN Quinones, | Case No |
|-------|---------------------------------|---------|
| _ | Elizabeth Joann Ortega-Quinones | |

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| | С | | shand Wife laint or Community | С | U | D | |
|---|---------|------------------|---|-----------|-------------|--------|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | ODEBTOR | H W J C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGEN | ONL-QU-DATE | SPUTED | AMOUNT OF CLAIM |
| Account No. 7230860002247553 | | | Opened 9/01/09 | Т | E | | |
| Kansas Counselors Of K Po Box 14765 Shawnee Mission, KS 66285 | | w | CollectionAttorney Creekwood Womens Care | | D | | 47.00 |
| Account No. xxx-xx-7496/xxx-xx-3671 | ╁ | | 2012 | | | | |
| North Kansas City Hospital PO Box 419263, Dept. 222 Kansas City, MO 64193 | | J | Medical Bills | | | | |
| | | | | | | | 618.00 |
| Account No. | T | | | | | | |
| Executive Financial Cons 310 Armour Road Kansas City, MO 64116 | | | Representing: North Kansas City Hospital | | | | Notice Only |
| Account No. xxx-xx-7496/xxx-xx-3671 | | | 2009 | | | | |
| Northland Radiology P.O. Box 419380 Dept. 128 Kansas City, MO 64141 | | J | Medical Bills | | | | 32.00 |
| Account No. 8721412222 | H | | Opened 6/01/12 | | | | |
| Receivables Management 14675 Martin Dr Eden Prairie, MN 55344 | | н | CollectionAttorney West Bay Acquisitions Llc | | | | |
| | | | | | | | 29.00 |
| Sheet no. 2 of 3 sheets attached to Schedule of | | | S | ub | tota | 1 | 726.00 |

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B6F (Official Form 6F) (12/07) - Cont.

| In re | Samuel NMN Quinones, | Case No |
|-------|---------------------------------|---------|
| _ | Elizabeth Joann Ortega-Quinones | |

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| | _ | | | _ | | _ | |
|--|-------------|-------------|---|-----------|---------------|----------|-----------------|
| CREDITOR'S NAME, | CO | Hu | sband, Wife, Joint, or Community | - 6 | N N | P | |
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | D E B T O R | C A M | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGEN | L I QU I DATE | DISPUTED | AMOUNT OF CLAIM |
| Account No. 771412021436 | | | Opened 6/01/04 Last Active 2/04/13 | ĪΫ | T | | |
| | 1 | | ChargeAccount | | Ď | | |
| Sams Club / GEMB Attention: Bankruptcy Department Po Box 103104 Roswell, GA 30076 | | w | | | | | 3,339.00 |
| A (N) www. 2400/www. www. 2674 | ╀ | ⊢ | 2040 | + | ┝ | ┝ | <u> </u> |
| Account No. xxx-xx-7496/xxx-xx-3671 | 1 | | 2010 Medical Bills | | | | |
| St Lukes Hospital 4401 Wornall Rd. Kansas City, MO 64111 | | J | Medical Bills | | | | |
| | ı | | | | | | 700.00 |
| | 1 | | | \bot | _ | _ | |
| Account No. | 1 | | | | | | |
| Venture Financial 9500 E. 63rd St. Ste 202 Kansas City, MO 64133-4951 | | | Representing: St Lukes Hospital | | | | Notice Only |
| | | | | \perp | | | |
| Account No. | | | | | | | |
| | | | | | | | |
| Account No. | ✝ | H | | + | H | | |
| Tiecount 110. | 1 | | | | | | |
| | ı | | | | | | |
| | ı | | | | | | |
| | ı | | | | | | |
| | ı | | | | | | |
| | | | | | | | |
| Sheet no. 3 of 3 sheets attached to Schedule of | _ | _ | 1 | Sub | tota | 1 | |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total of t | | | | 4,039.00 |
| Creations froming offsecured Nonphority Claims | | | (10tal of t | | | | |
| | | | | | Γota | | 0.005.00 |
| | | | (Report on Summary of So | chec | dule | es) | 9,885.00 |

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B6G (Official Form 6G) (12/07)

| In re | Samuel NMN Quinones, | Case No |
|-------|---------------------------------|---------|
| | Elizabeth Joann Ortega-Quinones | |

Debtors

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract. Case 13-40933-can13 Doc 1 Filed 03/19/13 Entered 03/19/13 15:42:58 Desc Main Document Page 24 of 41

B6H (Official Form 6H) (12/07)

| т. | Comment NIMNI Code on a | C N |
|-------|---------------------------------|----------|
| In re | Samuel NMN Quinones, | Case No. |
| | Elizabeth Joann Ortega-Quinones | |

Debtors

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

Josephine Ortega 3434 Bell Kansas City, MO 64111 Chase 10790 Rancho Bernardo Rd San Diego, CA 92127

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B6I (Official Form 6I) (12/07)
Samuel NMN Quinones

| In re | Elizabeth Joann Ortega-Quinones | | Case No. | |
|-------|---------------------------------|-----------|----------|--|
| | | Debtor(s) | | |

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

| Debtor's Marital Status: | DEPENDENT | S OF DEBTC | R AND SPO | OUSE | | |
|--|--|----------------|----------------|--------------|-----------------|----------|
| | RELATIONSHIP(S): AGE | | AGE(S): | | | |
| Married | Son | | 23 | | | |
| Marriod | Daughter | | 29 | | | |
| | Granddaughter | | 3 | | | |
| Employment: | DEBTOR | | | SPOUSE | | |
| Occupation | Site Specialist | Acco | unt Rece | ivable Clerk | | |
| | Ricoh | Indep | endent E | lectric | | |
| * * | 04/2012-Current | | 00-Curre | | | |
| | 3920 Arkwright Rd | | Oliver St | | | |
| | Suite 400 | | as City, K | S 66106 | | |
| | Macon, GA 31210 | | ,, | | | |
| | projected monthly income at time case filed) | | | DEBTOR | | SPOUSE |
| | commissions (Prorate if not paid monthly) | | \$ | 2,665.54 | \$ | 2,274.13 |
| 2. Estimate monthly overtime | commissions (Fronte if not para monthly) | | \$ | 0.00 | \$ - | 0.00 |
| 2. Estimate monthly overtime | | | Ψ | 0.00 | Ψ_ | 0.00 |
| 3. SUBTOTAL | | | \$ | 2,665.54 | \$ | 2,274.13 |
| 3. SUBTOTAL | | | Φ | 2,003.34 | Φ_ | 2,214.13 |
| 4. LESS PAYROLL DEDUCTIONS | S | | | | | |
| a. Payroll taxes and social secu | | | \$ | 489.26 | \$ | 314.95 |
| b. Insurance | inty | | \$ | 288.71 | \$ - | 0.00 |
| c. Union dues | | | \$ | 0.00 | Ψ — | 0.00 |
| | Detailed Income Attachment | | φ — | 25.34 | φ_ | 112.84 |
| u. Other (Specify) | Detailed income Attachment | | Φ | 23.34 | Φ_ | 112.04 |
| 5. SUBTOTAL OF PAYROLL DEI | DUCTIONS | | \$ | 803.31 | \$_ | 427.79 |
| 6. TOTAL NET MONTHLY TAKE | HOME PAY | | \$ | 1,862.23 | \$_ | 1,846.34 |
| 7. Regular income from operation of | f business or profession or farm (Attach detailed s | atement) | \$ | 0.00 | \$ | 0.00 |
| 8. Income from real property | | | \$ | 0.00 | \$ | 0.00 |
| 9. Interest and dividends | | | \$ | 0.00 | \$ | 0.00 |
| | rt payments payable to the debtor for the debtor's | ise or that of | \$ | 0.00 | \$ | 0.00 |
| dependents listed above 11. Social security or government as | esistance | | Φ | 0.00 | φ_ | 0.00 |
| (Specify): | on the state of th | | \$ | 0.00 | \$ | 0.00 |
| | | | \$ | 0.00 | \$ _ | 0.00 |
| 12. Pension or retirement income | | | \$ | 0.00 | Φ — | 0.00 |
| | | | φ | 0.00 | φ | 0.00 |
| 13. Other monthly income (Specify): Tax Refund | | | \$ | 84.00 | • | 0.00 |
| (Specify): Tax Refund | | | \$ <u></u> | | Φ — | |
| | | | » | 0.00 | ₂ — | 0.00 |
| 14. SUBTOTAL OF LINES 7 THRO | OUGH 13 | | \$ | 84.00 | \$ | 0.00 |
| 15. AVERAGE MONTHLY INCOM | ME (Add amounts shown on lines 6 and 14) | | \$ | 1,946.23 | \$_ | 1,846.34 |
| 16. COMBINED AVERAGE MON | THLY INCOME: (Combine column totals from la | ne 15) | | \$ | 3,792 | 2.57 |

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

Adult children live in the home and do not contribute.

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B6I (Official Form 6I) (12/07)

| | Samuel NMN Quinones | | | |
|-------|---------------------------------|-----------|----------|--|
| In re | Elizabeth Joann Ortega-Quinones | | Case No. | |
| | | Debtor(s) | <u></u> | |

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S) Detailed Income Attachment

Other Payroll Deductions:

| AF | \$ 0.00 | \$ 43.29 |
|--------------------------------|-------------|--------------|
| AFAT | \$ 0.00 | \$ 34.32 |
| M | \$ 0.00 | \$ 35.23 |
| Spouse/Dep Life | \$ 10.49 | \$ 0.00 |
| Life | \$ 12.68 | \$ 0.00 |
| United Way | \$ 2.17 | \$ 0.00 |
| Total Other Payroll Deductions | \$ 25.34 | \$ 112.84 |

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B6J (Official Form 6J) (12/07)

Samuel NMN Quinones

| | | 5.1 () | - | |
|-------|---------------------------------|---------------|----------|--|
| In re | Elizabeth Joann Ortega-Quinones | | Case No. | |
| | Carriaci Mini Quillorics | | | |

Debtor(s)

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

| ☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Comple expenditures labeled "Spouse." | ete a separat | e schedule of |
|--|---------------|---------------|
| 1. Rent or home mortgage payment (include lot rented for mobile home) | \$ | 0.00 |
| a. Are real estate taxes included? Yes X No | · | |
| b. Is property insurance included? Yes X No | | |
| 2. Utilities: a. Electricity and heating fuel | \$ | 410.00 |
| b. Water and sewer | \$ | 0.00 |
| c. Telephone | \$ | 62.00 |
| d. Other Cable / Internet | \$ | 182.00 |
| 3. Home maintenance (repairs and upkeep) | \$ | 50.00 |
| 4. Food | \$ | 600.00 |
| 5. Clothing | \$ | 50.00 |
| 6. Laundry and dry cleaning | \$ | 40.00 |
| 7. Medical and dental expenses | \$ | 45.00 |
| 8. Transportation (not including car payments) | \$ | 150.00 |
| 9. Recreation, clubs and entertainment, newspapers, magazines, etc. | \$ | 50.00 |
| 10. Charitable contributions | \$ | 0.00 |
| 11. Insurance (not deducted from wages or included in home mortgage payments) | | |
| a. Homeowner's or renter's | \$ | 0.00 |
| b. Life | \$ | 0.00 |
| c. Health | \$ | 0.00 |
| d. Auto | \$ | 136.00 |
| e. Other | \$ | 0.00 |
| 12. Taxes (not deducted from wages or included in home mortgage payments) | · | |
| (Specify) | \$ | 0.00 |
| 13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan) | Ψ <u> </u> | |
| a. Auto | \$ | 0.00 |
| b. Other | \$ | 0.00 |
| c. Other | \$ | 0.00 |
| 14. Alimony, maintenance, and support paid to others | \$ | 0.00 |
| 15. Payments for support of additional dependents not living at your home | \$ | 0.00 |
| 16. Regular expenses from operation of business, profession, or farm (attach detailed statement) | \$ | 0.00 |
| 17. Other See Detailed Expense Attachment | \$ | 150.00 |
| 18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.) | \$ | 1,925.00 |
| 19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document: | _ | |
| 20. STATEMENT OF MONTHLY NET INCOME | Φ. | c ==== |
| a. Average monthly income from Line 15 of Schedule I | \$ | 3,792.57 |
| b. Average monthly expenses from Line 18 above | \$ | 1,925.00 |
| c. Monthly net income (a. minus b.) | \$ | 1,867.57 |

| B6J (Offi | cial Form 6J) (12/07) | | | |
|-----------|---|-----------|----------|--|
| In re | Samuel NMN Quinones Elizabeth Joann Ortega-Quinones | | Case No. | |
| • | | Debtor(s) | | |

$\frac{\textbf{SCHEDULE J-CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)}}{\textbf{Detailed Expense Attachment}}$

Other Expenditures:

| Household Expenses | \$ | 50.00 |
|---------------------------------------|----------|--------|
| Misc. Expenses (gifts, postage, etc.) | <u> </u> | 50.00 |
| Personal Expenses | \$ | 50.00 |
| Total Other Expenditures | \$ | 150.00 |

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B6 Declaration (Official Form 6 - Declaration). (12/07)

United States Bankruptcy Court Western District of Missouri

| In re | Samuel NMN Quinones Elizabeth Joann Ortega-Quinones | | Case No. | | |
|-------|---|-----------|----------|----|--|
| | | Debtor(s) | Chapter | 13 | |
| | | | | | |

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

| | I declare under penalty of perjury the sheets, and that they are true and correct to the | | ad the foregoing summary and schedules, consisting ofy knowledge, information, and belief. | 21 |
|------|--|-----------|--|----|
| Date | March 19, 2013 | Signature | /s/ Samuel NMN Quinones Samuel NMN Quinones Debtor | |
| Date | March 19, 2013 | Signature | /s/ Elizabeth Joann Ortega-Quinones Elizabeth Joann Ortega-Quinones Joint Debtor | |

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

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B7 (Official Form 7) (12/12)

United States Bankruptcy Court Western District of Missouri

| In re | Samuel NMN Quinones Elizabeth Joann Ortega-Quinones | | Case No. | |
|-------|---|-----------|----------|----|
| | | Debtor(s) | Chapter | 13 |

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. If the answer to an applicable question is "None," mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the two years immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| AMOUNT SOURCE \$7,382.00 2013 YTD: Debtor Employment Income | |
|--|---|
| \$21,000.00 2012: Debtor Employment Income | |
| \$25,380.00 2011: Debtor Employment Income | |
| \$5,773.00 2013 YTD: Joint Dbt Employment Incom | е |
| \$26,189.00 2012: Joint Dbt Employment Income | |
| \$26,528.00 2011: Joint Dbt Employment Income | |

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2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT

SOURCE

3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR Residential Credit Solutions 4282 N Freeway Fort Worth, TX 76137 DATES OF PAYMENTS **01/2013**

AMOUNT PAID

AMOUNT STILL OWING

\$1,426.00 \$0.00

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,850*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATES OF PAYMENTS/ TRANSFERS

spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT PAID OR VALUE OF TRANSFERS

AMOUNT STILL OWING

NAME AND ADDRESS OF CREDITOR

c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL OWING

4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER

NATURE OF PROCEEDING COURT OR AGENCY AND LOCATION STATUS OR DISPOSITION

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

^{*} Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER

DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER DESCRIPTION AND VALUE OF

PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

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9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

Castle Law Office of Kansas City 811 Grand Blvd. Suite 101 Kansas City, MO 64106 DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR 03/2013 AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY
\$375.00

•

10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

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14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER DESCRIPTION AND VALUE OF PROPERTY LOCATION OF PROPERTY

15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which

the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

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18 . Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN ADDRESS

NATURE OF BUSINESS

BEGINNING AND ENDING DATES

NAME

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

None

NAME ADDRESS

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

| Date | March 19, 2013 | Signature | /s/ Samuel NMN Quinones | |
|------|----------------|-----------|-------------------------------------|--|
| | | _ | Samuel NMN Quinones | |
| | | | Debtor | |
| Date | March 19, 2013 | Signature | /s/ Elizabeth Joann Ortega-Quinones | |
| | | _ | Elizabeth Joann Ortega-Quinones | |
| | | | Joint Debtor | |

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

UNITED STATES BANKRUPTCY COURT WESTERN DISTRICT OF MISSOURI

NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$46 administrative fee, \$15 trustee surcharge: Total Fee \$306)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$46 administrative fee: Total fee \$281)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over

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Form B 201A, Notice to Consumer Debtor(s)

Page 2

a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filing fee, \$46 administrative fee: Total fee \$1,213)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$46 administrative fee: Total fee \$246)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

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B 201B (Form 201B) (12/09)

United States Bankruptcy Court Western District of Missouri

| | Samuel NMN Quinones | | | |
|-------|---------------------------------|-----------|----------|----|
| In re | Elizabeth Joann Ortega-Quinones | | Case No. | |
| | | Debtor(s) | Chapter | 13 |

CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

Certification of Debtor

I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy Code.

| Samuel NMN Quinones Elizabeth Joann Ortega-Quinones | X | /s/ Samuel NMN Quinones | March 19, 2013 |
|--|---|-------------------------------------|----------------|
| Printed Name(s) of Debtor(s) | | Signature of Debtor | Date |
| Case No. (if known) | X | /s/ Elizabeth Joann Ortega-Quinones | March 19, 2013 |
| | | Signature of Joint Debtor (if any) | Date |

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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B22C (Official Form 22C) (Chapter 13) (12/10)

| In re | Samuel NMN Quinones Elizabeth Joann Ortega-Quinones | According to the calculations required by this statement: The applicable commitment period is 3 years. |
|---------|---|---|
| Case No | | ☐ The applicable commitment period is 5 years. ☐ Disposable income is determined under § 1325(b)(3). |
| | | ■ Disposable income is not determined under § 1325(b)(3). (Check the boxes as directed in Lines 17 and 23 of this statement.) |

CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedules I and J, this statement must be completed by every individual chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

| | | Par | t I. | REPORT OF INC | COM | 1E | | | |
|---|---|---|----------------------|---|--------------------|----------------------------------|-----|----------------|--------------------------|
| 1 | | tal/filing status. Check the box that applies at Unmarried. Complete only Column A ("Deb | | | | | men | t as directed. | |
| | All fi | b. Married. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") All figures must reflect average monthly income received from all sources, derived during the six calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six months, you must divide the six-month total by six, and enter the result on the appropriate line. | | | | | | | Column B Spouse's Income |
| 2 | | s wages, salary, tips, bonuses, overtime, con | | • | | | \$ | 2,665.00 | \$ 2,274.00 |
| 3 | Income from the operation of a business, profession, or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 3. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as | | | | | | | , | , |
| | a. | Gross receipts | \$ | Debtor 0.00 | Φ | Spouse 0.00 | | | |
| | b. | Ordinary and necessary business expenses | \$ | 0.00 | | 0.00 | | | |
| | c. | Business income | | btract Line b from | | | \$ | 0.00 | \$ 0.00 |
| 4 | the ap | s and other real property income. Subtract lapropriate column(s) of Line 4. Do not enter a of the operating expenses entered on Line b | a nu | mber less than zero | o. D | o not include any | | | |
| | b. | Ordinary and necessary operating expenses | \$ | 0.00 | \$ | 0.00 | | | |
| | c. | Rent and other real property income | Sı | ubtract Line b from | Lin | e a | \$ | 0.00 | \$ 0.00 |
| 5 | Inter | est, dividends, and royalties. | | | | | \$ | 0.00 | \$ 0.00 |
| 6 | Pensi | ion and retirement income. | | | | | \$ | 0.00 | \$ 0.00 |
| 7 | exper purpo debto | amounts paid by another person or entity, on sees of the debtor or the debtor's dependent ose. Do not include alimony or separate main or's spouse. Each regular payment should be rein Column A, do not report that payment in C | s, in tena por | ncluding child sup ance payments or a ted in only one col | port mou | paid for that nts paid by the | \$ | 0.00 | \$ 0.00 |
| 8 | Unemployment compensation. Enter the amount in the appropriate column(s) of Line 8. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below: | | | | | | | | |
| | | mployment compensation claimed to benefit under the Social Security Act Debtor | r \$ | 0.00 Sp | ouse | \$ 0.00 | \$ | 0.00 | \$ 0.00 |

| 9 | on a separate praintenance separate main payments rece | all other sources. Specify sources page. Total and enter on Line 9. payments paid by your spouse, ntenance. Do not include any beived as a victim of a war crime, or domestic terrorism. | Do not include enefits receive | ude alimony all other pay ed under the | or separate yments of alimor Social Security A | ıy or | | | |
|----|--|--|---|--|--|--|---|---------|-----------|
| | memationare | n domestic terrorism. | | btor | Spouse | | | | |
| | a. b. | | \$ | | \$ | | \$ 0. | 00 \$ | 0.00 |
| 10 | , ' | l Lines 2 thru 9 in Column A, an | т . | R is complet | т | hrough 9 | \$ U. | 00 s | 0.00 |
| 10 | in Column B. | Enter the total(s). | | | | | \$ 2,665. | 00 \$ | 2,274.00 |
| 11 | | mn B has been completed, add I olumn B has not been completed | | | | | \$ | | 4,939.00 |
| | | Part II. CALCULAT | ION OF § | 1325(b)(4 |) COMMITN | IENT I | PERIOD | | |
| 12 | Enter the am | ount from Line 11 | | | | | | \$ | 4,939.00 |
| 13 | calculation of enter on Line the household income (such debtor's depen on a separate plan. | the commitment period under § 13 the amount of the income list expenses of you or your depend as payment of the spouse's tax lindents) and the amount of incompage. If the conditions for enterior | 1325(b)(4) ded in Line 10 dents and specability or the e devoted to e | oes not requi), Column B cify, in the lii spouse's sup each purpose tment do not | re inclusion of the that was NOT paid has below, the base port of persons of the first of the fi | e income d on a reg sis for exc her than t at addition | of your spouse, gular basis for luding this he debtor or the | | |
| | c. Total and ente | or on Line 13 | | \$ | |] | | \$ | 0.00 |
| 14 | | e 13 from Line 12 and enter the | e result. | | | | | 1 | |
| | | urrent monthly income for § 13 | | fultiply the a | nount from Line | 14 by the | number 12 and | \$ | 4,939.00 |
| 15 | enter the resul | | 9 2 5(b)(4). 141 | turupiy tile ti | nount from Eme | 14 by the | number 12 und | \$ | 59,268.00 |
| 16 | | nedian family income. Enter the available by family size at www. | | | | | | | |
| | a. Enter debto | or's state of residence: | МО | b. Enter del | otor's household | size: | 5 | \$ | 78,187.00 |
| 17 | ■ The amount top of page | of § 1325(b)(4). Check the applicant on Line 15 is less than the are 1 of this statement and continuent on Line 15 is not less than the of page 1 of this statement and continuent on Line 15 is not less than the of page 1 of this statement and continuent of the less than the of page 1 of this statement and continuent of the less than the | mount on Lir e with this sta e amount on | ne 16. Check atement. 1 Line 16. C | the box for "The | | | | |
| | • | Part III. APPLICATION OF | § 1325(b)(3) | FOR DET | ERMINING DIS | SPOSABI | LE INCOME | | |
| 18 | Enter the am | ount from Line 11. | | | | | | \$ | 4,939.00 |
| 19 | any income list debtor or the consument of the dependents) and | estment. If you are married, but a sted in Line 10, Column B that we debtor's dependents. Specify in the spouse's tax liability or the spond the amount of income devote. If the conditions for entering the | vas NOT paid he lines below use's support d to each pur | on a regular withe basis for of persons o pose. If nece | basis for the hour or excluding the C ther than the deb ssary, list addition | sehold ex Column B tor or the | penses of the income(such as debtor's | | |
| | c. | | | \$ | |] | | | |
| | Total and ente | r on Line 19. | | | | | | \$ | 0.00 |
| 20 | Current mon | thly income for § 1325(b)(3). S | ubtract Line | 19 from Line | 18 and enter the | result. | | \$ | 4.939.00 |

B22C (Official Form 22C) (Chapter 13) (12/10)

| B22C (O | ficial Form 22C) (Chapter 13) (12/10) | | 3 | | | | | | |
|---------|---|----------|-------------|--|--|--|--|--|--|
| 21 | Annualized current monthly income for § 1325(b)(3). Multiply the amount from Line 20 by the number 12 and enter the result. | | | | | | | | |
| 22 | Applicable median family income. Enter the amount from Line 16. | \$ | 78,187.00 | | | | | | |
| 23 | Application of § 1325(b)(3). Check the applicable box and proceed as directed. The amount on Line 21 is more than the amount on Line 22. Check the box for "Disposable income is determined under § 1325(b)(3)" at the top of page 1 of this statement and complete the remaining parts of this statement. | | | | | | | | |
| | ■ The amount on Line 21 is not more than the amount on Line 22. Check the box for "Disposable income is not 1325(b)(3)" at the top of page 1 of this statement and complete Part VII of this statement. Do not complete Part | | | | | | | | |
| | Part VII. VERIFICATION | | | | | | | | |
| | I declare under penalty of perjury that the information provided in this statement is true and correct. (If this is a join must sign.) | | oth debtors | | | | | | |
| 61 | Date: March 19, 2013 Signature: /s/ Samuel NMN Quinone Samuel NMN Quinones (Debtor) | <u>S</u> | | | | | | | |
| | Date: March 19, 2013 Signature /s/ Elizabeth Joann Ortego- Elizabeth Joann Ortego- (Joint Debtor, if an | Quinone | | | | | | | |